## RECEIVED

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVIC STATE PUBLIC HEALTH LABORATORY

By Stephen Wilson at 11:12 am, Aug 07, 2020

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.


| TEST $1 * .099$ | TEST $2 \sim .098$ | TEST $3 * .098$ |
| :--- | :--- | :--- |
| $\nabla$ RFI DETECTOR OPERATING |  |  |

indicate the number of breath tests in the following ranges since the last maintenance report: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

|  |  |  |  |  |  |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| REFUSALS | 0 | $(0-.04)$ | 0 | $(.05-.09)$ | 0 | $(.10-.14)$ | 0 | $(.15-19)$ | 0 | $(O V E R ~ .19)$ | 0 |

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

## INSPECTING OFFICER

| $3225$ | PRIITT NAME <br> PO Jahns, DSN 3725 |
| :---: | :---: |
| TYPE II PEREMLI KUMMEEREXPIRATION DATE | TELEPHONE NUMBER |
| 290039 02/20/2021 | ( 636 ) 529-8210 |

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

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Version no: 5328
TEST RECORO 00189


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Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

## Certificate of Analysis

## Customer Name

Exclusive Supplier Intoximeters, Inc. 2081 Craig Road
St. Louis, Mo 63146
Lot \# AG015503 Model 108cacd
Exp. Date
3-Jun-2022

Cyl. Type 108

Component
Ethanol
Nitrogen

Certified Concentration $0.100 \pm 2 \% \operatorname{BrAC}$ ( 272 ppm ) Balance

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

| RGM Serial No. | Concentration | RGM Serial No. | Concentration |
| :---: | :---: | :---: | :---: |
| EB0010581 | 392.1 ppm | EB0010603 | 393.0 ppm |
| EB0010570 | 259.8 ppm | EB0010559 | 258.2 ppm |
| EB0010285 | 208.0 ppm | EB0010595 | 208.3 ppm |
| EB0010561 | 103.6 ppm | EB0010562 | 104.2 ppm |
| EB0010681 | 52.12 ppm | EB0010579 | 52.81 ppm |
| CRM Serial No. | Concentration | CRM Serial No. | Concentration |
| CC434668 | 800.0 ppm | 0056649 | 390.1 ppm |
| CC234503 | 253.0 ppm | 0056662 | 150.2 ppm |

Analytical Method: NDIR
Analytical Method: NDIR



# STATE OF MISSOURI <br> DEPARTMENT OF HEALTH AND SENIOR SERVICES <br> BREATH ALCOHOL PROGRAM <br> PERMIT <br> TYPE II <br> KYLE JAHNS 

## Is hereby authorized to instruct and supervise operators, train instructore, Inspect, oallbrate, periorm flold service and repairs, and operate the following breath analyzer(s): <br> \section*{ALCO-SENSOR IV WITH PRINTER, INTOX DMT}

for the determination of the alcoholle content of blood from a sample of explred alti Permit lasued urider the provislons of sectlons 577.020 through 577.041 , RSMO and 308.111 through 308.119. ASMO.

DATE $2 / 20 / 2019$
NUMBEA 200039
EXPIAES 2/20/2021 $\qquad$

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DIRECTOA OF BTATE PUELIC HEALTH LAGORATOAY


DIRECTOH OF DEPARTMENT QF HEALTH ANO BENIOR SEAVIOES

